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U.S. Serial No. : 10/693,480
Filed : October 23, 2003
Page 2 of 13 of Amendment in Response to September 15, 2011 Office Action and Supplemental Information Disclosure Statement

Amendments to the Claims

This listing of claims will replace all prior versions, and listings, of claims in the application:

Listing of Claims:

1-34. (Cancelled)

35. (Currently amended) A method of treating a subject suffering from a disorder of a heart tissue involving loss or apoptosis of cardiomyocytes which comprises intramyocardially or intracoronarily administering to the subject an amount of an agent comprising a human stromal derived factor-1 effective to induce regeneration of endogenous cardiomyocytes and thereby treat the disorder of the heart tissue involving loss or apoptosis of cardiomyocytes in the subject, ~~wherein the human stromal derived factor-1 is human stromal derived factor-1 α or human stromal derived factor-1 β .~~

36. (Cancelled)

37. (Previously Presented) The method of claim 35, wherein the agent is administered intramyocardially or intracoronarily via (a) a stent, (b) a scaffold, or (c) a slow-release formulation.

38-42. (Cancelled)

43. (Previously Presented) The method of claim 35, wherein the agent is administered intramyocardially.

44-45. (Cancelled)

46. (Previously presented) The method of claim 35, wherein the human stromal-derived factor-1 is human stromal-derived factor-1 α .

47. (Previously presented) The method of claim 35, wherein the human stromal-derived factor-1 is human stromal-derived factor-1 β .

48. (Cancelled)

49. (Previously presented) The method of claim 35, wherein the

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Page 3 of 13 of Amendment in Response to September 15, 2011 Office Action and Supplemental Information Disclosure Statement

disorder of the heart tissue comprises myocardial infarction, congestive heart failure, chronic ischemia, ischemic disease, diabetic heart disease or cardiomyopathy.

50. (Previously presented) The method of claim 35, wherein the disorder of the heart tissue comprises ischemic disease.

51. (Previously Presented) The method of claim 43, wherein the agent is administered intramyocardially by direct injection into a myocardium.

52-56. (Cancelled)

57. (Previously presented) The method of claim 35, wherein the treatment of the disorder of the heart tissue results in an improved ejection fraction of the heart.